



STAR eBenefits Open Enrollment Quick Start Guide



**IT'S YOUR CHOICE OPEN ENROLLMENT PERIOD:
OCTOBER 17 – NOVEMBER 11, 2016. ALL ELECTIONS MADE
DURING THIS PERIOD ARE EFFECTIVE JANUARY 1, 2017.**

This guide will show you how to make all of your 2017 benefit elections through STAR eBenefits. If you have questions, please contact your agency payroll and benefits office.

ENROLLING IN BENEFITS

1. Go to the STAR self-service landing page: <https://ess.wi.gov>
2. Click on the **Benefits Enrollment** link in the Wisconsin Benefits section of the page.
3. This will bring you to the Open Enrollment Landing Page. Review the material on this page and click on the **Select** button to start the enrollment process.

Open Benefit Events				
Event Description	Event Date	Event Status	Job Title	
Open Enrollment	01/01/2017	Open	PAYROLL BEN PROGRAM OFF	Select

4. You will see the Open Enrollment Summary Page. **Only benefit plans that have an enrollment will be listed on this page.** If you are currently enrolled in any of the plans, your current benefit election will also display.

UPDATING / SELECTING A PLAN

5. Click on the **Edit** button next to the plan you want to update for 2017.
6. Enrollment options for that plan will display. To select, click on the **radio button** next to the plan name.

Coverage Level	Your Costs	Tax Class
Employee Only	\$44.00	Before-Tax
Family	\$109.50	Before-Tax
Family w/ NonTax Dependent	\$109.50	Before-Tax
Family w/ 2+ NonTax Dependents	\$109.50	Before-Tax

7. On the health insurance page, you can turn on a filter to reduce the number of plans that appear on the page. Click the radio button next to the types of plans you would like to see and click **Apply Filter**.

Overview of all Plans
To reduce the number of plans displayed on the page, use the filter below.

Filter Options By

Dental Coverage

Show all plans

Show plans with dental only

Show plans without dental only

High Deductible Health Plan

Show all plans

Show HDHP plans only

Show non-HDHP plans only

Apply Filter

ADDING DEPENDENTS

8. Once you make your plan selection, scroll down to the bottom of the page to review your dependents. Check the box next to any dependent you would like covered by the plan. If you want to remove a dependent from coverage, uncheck the box next to the dependent's name.



REMINDER – if you enroll in family health insurance, you are required to cover all eligible family members. For the dental and vision plans, there is no requirement to cover all family members if you elect family coverage.

Enroll Your Dependents

The following list displays all individuals who are eligible to be your dependents. If an individual is missing from this list, use the Add/Review Dependents button to determine why they are not eligible. You may also use this button to add new dependents to your list.

You may enroll any of the following individuals for coverage under this plan by checking the Enroll box next to the dependent's name.

Dependent Beneficiary		
Enroll	Name	Relationship
<input checked="" type="checkbox"/>	Oz Rosenberg	Spouse
<input checked="" type="checkbox"/>	Tara Rosenberg	Child

Add/Review Dependents

9. If you need to add a Dependent, click on **Add/Review Dependents** and then the **Add a dependent or beneficiary** button on the following page.

Add a dependent or beneficiary

[Return to Event Selection](#)

10. On the Dependent Personal Information Page, add the new dependent's name, gender, SSN, relationship to employee, marital status and marital status as of date (as of date not required if single).
11. Scroll down and click **Save** to add the dependent and click **OK**.
12. Review the information on the new dependent and repeat process if you have additional dependents to add.
13. Once all dependents are entered, click **Return to Event Selection**.
14. Once you have made your selection on the page, scroll to the bottom of the page and click **Update** and **Continue**. If you do not want to save your changes, click Discard Changes.

REVIEWING ELECTIONS

15. When you click **Update** and **Continue**, you will be brought to a page that confirms your election, covered dependents and effective date. Review this information for accuracy and click **Update Elections**. This will save your elections.



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Your Choice
You have chosen Dean w/Dental with Family coverage.

Your Estimated Per-Pay-Period Cost

Your Cost \$109.50

Your Covered Dependents

Dependent Information	
Name	Relationship
Oz Rosenberg	Spouse
Tara Rosenberg	Child

Notes
Once submitted, this choice will take effect on 01/01/2017. Deductions for this choice will start with the pay period beginning 12/11/2016.

Select the Update Elections button to store your choices.
Select the Discard Changes button to go back and change your choices.

16. You will be brought back to the **Enrollment Summary Page**. You will see your 2017 election next to "New".

Enrollment Summary

Health
Current: GHC SC WI w/Dental:Family
New: **Dean w/Dental:Family**

SUBMITTING ELECTIONS

17. Continue making your benefit elections by clicking **Edit** next to the applicable plan.

REMINDER – you must re-enroll in all Flexible Spending Accounts (FSAs) and a Health Savings Account every year if you want to participate. All of these plans will say "No Coverage" for 2017 until you make an election.

18. Once you have made all of your elections, scroll to the bottom of the **Enrollment Summary** page and click **Save** and **Continue** to begin the submission process.

19. If you enrolled in health insurance, you will be required to indicate if you have Other Health Insurance or Medicare. If you answer "Yes", complete the requested information about the plan if available. You may also enter your clinic or primary care physician on this page but it is not required.

Coordination of Benefits - Employee

Other Health Insurance

Medicare

Physician Details

National Provider ID:

Clinic Name:

Physician First Name:

Physician Last Name:

20. Once you submit your elections, you are taken to the **Submit Confirmation Page**.

Benefits Enrollment WI-STAR

[Submit Confirmation](#)

Willow Rosenberg

Your benefit choices have been successfully submitted to the Benefits Department.

The day after you submit your election, you will receive an email at your business email address to let you know that you have a benefit enrollment confirmation notice available to review.

Your confirmation notice will be available in the Wisconsin Benefits section of the [STAR self-service landing page](#).

To return to the Benefits Enrollment page, use the OK button.

CONFIRMING ELECTIONS

21. When you click **OK**, you will be taken to your Open Enrollment page and the event status is now **Submitted**.

Open Benefit Events				
Event Description	Event Date	Event Status	Job Title	
Open Enrollment	01/01/2017	Submitted	PAYROLL BEN SYSTEMS COOR	<input type="button" value="Select"/>

NOTE – if you see your elections in submitted status, you know you *successfully* submitted your elections. You can go back in to your Open Enrollment event at any time during the Open Enrollment period if you need to make updates but you **MUST SUBMIT** your final elections by **November 11, 2016**.

22. The day after you submit your elections, you will receive an email from STAR at your business email address letting you know that you have a **Confirmation Statement** available.

23. Go to the **Wisconsin Benefits** section of the STAR self-service landing page at <https://ess.wi.gov> and click on the **Confirmation Statement** link to view your **2017 Benefit Confirmation Statement**. This statement will confirm your 2017 Open Enrollment elections, as well as your other ongoing benefits.

YOUR BENEFIT ELECTIONS AS OF JANUARY 1, 2017

Benefit Plan	Coverage	Pay Period Pre-Tax Deduction	Pay Period After-Tax Deduction
Health Rosenburg, Oz Rosenburg, Tara	Dean w/Dental Family	\$109.50	
State Group Life	Life - Basic+Suppl (2x salary)	\$9.12	
State Group Life Spouse & Dep	Life - 2 Units Spouse & Dep		\$2.50
Income Continuation Insurance	ICI Basic Coverage 6 75% of Salary		
Vision	Waive		
Healthcare FSA	Waive		
Transit (Before Tax)	Terminated		
WI Deferred Comp Pretax	WI Def Comp		\$70.00
Total Deductions Per Pay Period		\$188.62	\$2.50

ALL ELECTIONS MUST BE SUBMITTED BY NOVEMBER 11, 2016 AT 11:59PM.

See the [It's Your Choice Decision Guide](#) and the [2017 It's Your Choice website](#) for detailed Open Enrollment benefit information.